

DECLARATION OF SUSAN GARCIA

I, Susan Garcia, declare as follows:

1. I am a resident of the State of New Mexico. I am over the age of 18 and have personal knowledge of all the facts stated herein, except to those matters stated upon information and belief; as to those matters, I believe them to be true. If called as a witness, I could and would testify competently to the matters set forth below.

2. I am currently employed by the New Mexico Department of Health (“Department”)/Office of the Secretary as Director of the Office of Health Equity.

3. As Director of the Office of Health Equity I am responsible for overseeing health equity activities, the language access program, community engagement and Principal Investigator over the Health Equity grant.

4. Our New Mexico Department of Health recently received an award termination from the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (CDC) / Agency for Toxic Substances and Disease Registry (ATSDR). The total value of the terminated awards was \$38,523,203.00. All terminations were “for cause” based on the end of the COVID pandemic, rather than failure of the New Mexico Department of Health to follow the terms or conditions of the grants.

Descriptions of each award and the effects of these terminations follow.

5. In 2021, U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (CDC) / Agency for Toxic Substances and Disease Registry (ATSDR), invited applications for CDC-RFA-OT21-2103 National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities grant.

6. The primary purpose of this grant was to address and reduce health disparities and advance health equity related to COVID-19, recognizing that certain racial and ethnic minority groups, rural communities, people with disabilities, and other underserved populations were disproportionately impacted by the pandemic, both in terms of disease burden and access to public health services. The grant aimed to improve health equity infrastructure by building capacity within health departments to better serve disproportionately affected populations; expand and diversify the public health workforce, including the hiring of community health workers, equity coordinators, interpreters, and others who could improve access and communication; increase data collection and reporting capacity to better identify health disparities, particularly improving the quality of race, ethnicity, language, and disability data; improve COVID-19 testing, contact tracing, and prevention efforts in populations at higher risk for infection, hospitalization, or death; and build lasting partnerships with community-based organizations, Tribal entities, and other local partners to sustain health equity efforts beyond the COVID-19 pandemic.

7. As set out in its grant proposal, the New Mexico Department of Health intended to use the Health Disparities grant to address COVID-19 related health disparities and advance health equity in New Mexico by addressing the immediate and intermediate impact of COVID-19, while building off the existing foundation in New Mexico for long-term health equity work. (New Mexico Department of Health, HSD, CMS, 2016). Because of long standing partnerships with communities, nonprofits, universities, the healthcare system, and other state departments, the New Mexico Department of Health has been building the trust and credibility to implement a successful health equity initiative in communities. However, due to the reduction in budget for the New Mexico Department of Health over the years, the department needs further funding to

fully implement our equity agenda. This will require “Inside, Outside, and Across Strategies” to help frame the state’s continued response to the COVID19 pandemic and create lasting, institutionalized health equity in the state (NCHE, 2019). Modeled after Human Impact Partners’ practice-based framework the funding from this opportunity will implement strategies inside and outside of New Mexico Department of Health to build internal infrastructure to drive an equity agenda and support “outside and across” activities external to the New Mexico Department of Health to build bridges across multiple sectors to drive sustained changes.

8. The grant was approved June 1, 2021, The New Mexico Department of Health was awarded funding through the Centers for Disease Control and Prevention’s National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities (CDC-RFA-OT21-2103). The grant was approved following the department’s application submission on May 3, 2021, with a project period beginning on June 1, 2021, and ending on September 30, 2023. The original award period included two years of funding. A one year extension was awarded on June 1, 2023 and a subsequent 2 year no cost extent was awarded on June 1, 2024 to end May 31, 2026. The total amount awarded to the New Mexico Department of Health was \$38,523,203.

9. On May 28, 2021, Centers for Disease Control and Prevention/Substance Abuse and Mental Health Services Administration produced a Notice of Award setting forth the terms and conditions of the grant award. A true and correct copy of the corresponding Notice of Award and its attachments, dated May 28, 2021, is attached as Exhibit A. As set forth therein, termination of the grant by the Centers for Disease Control and Prevention/Substance Abuse and Mental Health Services Administration is permitted only if a recipient or subrecipient CDC is

required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS). (45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

10. Since June 1, 2021, New Mexico Department of Health has used the CDC-RFA-OT21-2103 grant funds in a manner fully consistent with the Centers for Disease Control and Prevention/Substance Abuse and Mental Health Services Administration's statements regarding the nature of the grant and the New Mexico Department of Health grant application.

11. New Mexico Department of Health has funded personnel and contractors, contracted with community organizations and academic institutions to address COVID-19 related health disparities and advance health equity in New Mexico. New Mexico Department of Health also leveraged grant funds for data modernization to get better, faster actionable insights for decision making at all levels of public health. The remaining funds of the grant were used to allow the Department to continue key activities under the revised scope of work. The updated work plan included sustaining core public health functions, supporting rural maternal health services through the continued funding of two contracted midwives, and ensuring the completion of financial review activities. Additionally, the work plan included the reassignment of BRFSS survey outreach efforts to hire additional contractors to maintain data collection capacity. The Department contracted with academic institutions to conduct an evaluation of the Medications for Opioid Use Disorder (MOUD) program and continued the development of a Public Health Certification Program, and the Public Health Residency Program.

12. The following summarizes the projects associated with the remaining amount of funds, approximately \$7,721,969.480.

Marketing and Public Outreach (Redirect 1, 2, 3, 20) Redirected funds supported New Mexico Department of Health's Marketing Division to revitalize the Trusted Voices Campaign, develop a unified branding strategy, and improve the department's website. Funds also supported public health messaging related to the State Health Improvement Plan (SHIP) and recruitment campaigns to address workforce attrition post-COVID-19. Additional funds supported public health communications and community engagement activities to promote health equity and address health disparities across the state.

Statewide Public Health Referral Network & Health Improvement Planning (Redirect 11, 13, 24) Funds supported the development of the Statewide Public Health Referral Network and the SHIP, strengthening the Health Promotion Team's capacity to address New Mexico's health priorities. Activities included staff training, collaboration with Health Councils, maternal mortality review efforts, and the establishment of a maternal health task force.

Public Health Data Systems and SOGI Data Collection (Redirect 21, 22) Redirected funds improved public health data systems and equity-focused data collection. The indicator-Based Information System (IBIS) was enhanced to improve data accessibility and visualization. Simultaneously, funds supported Sexual Orientation and Gender Identity (SOGI) data collection, technical assistance, and staff training to comply with Executive Order 2021-048. The BRFSS survey was expanded to include SOGI questions.

Administrative and Operational Support (Redirect 12, 14, 16) Funds were used to strengthen administrative operations and local outreach. This included supporting financial,

procurement, and HR processes, policy and technical infrastructure, and establishing Community Health Worker (CHW) positions across New Mexico to advance health equity.

Community Health Worker Training Program & Agricultural Worker Data Collection (Redirect 9, 23) Redirected funds expanded the CHW Training Program to include specialty training in behavioral and mental health and evaluation efforts. Funds also supported the development of a standardized data collection tool for agricultural worker populations to inform public health strategies.

Health Systems Partnerships and Evaluation (Redirect 5, 19) Funds supported partnerships with health systems and expanded evaluation capacity. New Mexico Department of Health invested in bringing the COVID-19 registration system in-house, improving data integration, and reducing third-party costs. Additional funds were used to develop a Strategic Information Systems Plan and conduct evaluations to assess workforce capacity, core public health services, and organizational structure.

Health Equity Capacity Building and Language Access (Redirect 6, 7, 8, 17, 18,) Activities included oral health programs, nicotine prevention, childhood obesity prevention, and developing a Racial Equity Action Plan. Additional funds supported third-party assessments of New Mexico Department of Health's workforce, core services, and organizational readiness to better address health disparities.

Maternal and Child Health Equity (Redirect 24) Funds supported efforts to improve maternal health outcomes and address disparities. Activities included creating a maternal health task force, investigating barriers to midwifery practice, and engaging community partners in perinatal quality improvement initiatives.

Funds are drawn down monthly with our next draw scheduled for April 11-17, 2025.

13. Financial and progress reports were submitted in a timely manner on a quarterly basis. One expenditure was subsequently identified as unallowable; however, the New Mexico Department of Health (New Mexico Department of Health) reimbursed the federal government for this cost in February 2025. This matter was addressed promptly, with minimal extensions requested throughout the reporting period. The New Mexico Department has received feedback

The New Mexico Department of Health received positive feedback on both programmatic and financial performance. Reviewers noted that New Mexico Department of Health has made satisfactory progress in implementing program activities and expending grant funds. It was acknowledged that the department proposed reasonable plans to address identified barriers and demonstrated potential to meet performance measures. Reviewers recommended revisiting and refining the workplan to align with the ongoing challenges related to obtaining budget authority from the state, and to ensure project activities remain achievable. Additionally, New Mexico Department of Health was encouraged to continue working closely with fiscal staff to ensure timely drawdown and reporting of grant expenditures. No issues were identified in the Funding Allocation Table Report.

14. The New Mexico Department of Health has worked closely with our Project Officer to submit, review and gain approval for all changes and extensions within the approved workplan. The Department has been diligent in staying aligned with the initial purpose of the grant.

15. On March 25, 2025, without any prior notice or indication, the Center for Disease Control and Prevention informed the New Mexico Department of Health that effective

March 24, 2024, its CDC-RFA-OT21-2103 was being terminated as of March 24, 2024. A true and correct copy of the grant award termination notice via email and is attached as Exhibit B.

16. The award was terminated “for cause.” The Notice of Termination states, “The purpose of this amendment is to terminate this award, which is funded by COVID-19 supplemental appropriations. The termination of this award is for cause.” The notice further states that the end of the COVID-19 pandemic justifies cause to terminate COVID-19 related grants and cooperative agreements.

17. The notice did not include information regarding appeal rights and processes.

18. The New Mexico Department of Health relied and acted upon its expectation and understanding that HHS would fulfill its commitment to provide OT21-2103 funding it had awarded to the New Mexico Department of Health.

19. The loss of the CDC Health Equity Grant significantly impacts the New Mexico Department of Health’s ability to sustain key public health functions and initiatives that were established under this funding. Without this financial support, the Department will lose contractors who were hired specifically to address COVID-19-related health disparities and advance health equity, reducing the department’s capacity to engage underserved populations and maintain critical public health services. Partnerships with community organizations and academic institutions will be discontinued, disrupting collaborative efforts to address health disparities and build sustainable, community-driven solutions.

Additionally, the Department will no longer be able to maintain the data modernization efforts that would improve the timeliness and quality of public health data, including the enhancement of the Indicator-Based Information System (IBIS) and the collection of sexual orientation and gender identity (SOGI) data. Public health workforce development

programs—such as the Public Health Certification Program, the Public Health Residency Program, and the Community Health Worker Training Program—will be scaled back or discontinued, limiting the department’s ability to grow a skilled, equity-focused public health workforce. Efforts to collect standardized data on agricultural worker populations will also come to an end, leaving a gap in the department’s ability to assess and address the health needs of this vulnerable group.

The loss of this grant will further affect New Mexico Department of Health’s ability to conduct public outreach and engagement. Initiatives such as the Trusted Voices Campaign, enhancements to the department’s website, and workforce recruitment campaigns will no longer be supported, reducing New Mexico Department of Health’s ability to communicate effectively with the public and address workforce attrition. Administrative and operational supports funded by the grant, including financial, procurement, and HR functions, will also be diminished, affecting the public health infrastructure.

Finally, core health equity initiatives will be disrupted. Maternal health equity efforts, including rural midwifery services and the maternal health task force, will lose funding. Evaluations of health system partnerships, the Medications for Opioid Use Disorder (MOUD) program, and New Mexico Department of Health’s internal capacity to deliver equitable public health services will not be completed. The department will also lose the ability to continue building health equity capacity through efforts such as oral health promotion, nicotine prevention and childhood obesity initiatives.

20. Prior to the grant award termination on March 24, 2025, Center of Disease Control had never provided New Mexico Department of Health with notice, written or otherwise,

that the grant administered by the New Mexico Department of Health was in any way unsatisfactory.

I declare under penalty of perjury under the laws of the United States that, to the best of my knowledge, the foregoing is true and correct.

Executed on March 24, 2025, at Santa Fe, New Mexico.

Signed by:



B9A9D04B5AC3484...

Susan Garcia

**Recipient Information****1. Recipient Name**

New Mexico Department of Health
1190 S St Francis Dr Flr 4 Ste N 4100
New Mexico Department of Health
Santa Fe, NM 87505-4173
[NO DATA]

2. Congressional District of Recipient

03

3. Payment System Identifier (ID)

1856000565C9

4. Employer Identification Number (EIN)

856000565

5. Data Universal Numbering System (DUNS)

808389274

6. Recipient's Unique Entity Identifier**7. Project Director or Principal Investigator**

Laura Parajon M.D.
Laura.Parajon@state.nm.us
505-803-3873

8. Authorized Official

Laura Parajon M.D.
Laura.Parajon@state.nm.us
505-803-3873

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Mr. Dedrick Muhammad
Grants Management Specialist
qtm2@cdc.gov
678-475-4523

10. Program Official Contact Information

Ms. Christine Graaf
kx2@cdc.gov
404-498-0442

30. Remarks**Federal Award Information****11. Award Number**

1 NH75OT000094-01-00

12. Unique Federal Award Identification Number (FAIN)

NH75OT000094

13. Statutory Authority

317(K)(2) OF PHSA 42USC 247B(K)(2)

14. Federal Award Project Title

New Mexico Department of Health - COVID19 Health Equity Initiative

15. Assistance Listing Number

93.391

16. Assistance Listing Program Title

Activities to Support State, Tribal, Local and Territorial (STLT) Health Department Response to Public Health or Healthcare Crises

17. Award Action Type

New

18. Is the Award R&D?

No

Summary Federal Award Financial Information**19. Budget Period Start Date** 06/01/2021 - **End Date** 05/31/2023**20. Total Amount of Federal Funds Obligated by this Action** \$38,523,202.00

20a. Direct Cost Amount \$35,442,203.00

20b. Indirect Cost Amount \$3,080,999.00

21. Authorized Carryover \$0.00**22. Offset** \$0.00**23. Total Amount of Federal Funds Obligated this budget period** \$0.00**24. Total Approved Cost Sharing or Matching, where applicable** \$0.00**25. Total Federal and Non-Federal Approved this Budget Period** \$38,523,202.00**26. Project Period Start Date** 06/01/2021 - **End Date** 05/31/2023**27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period** Not Available**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Ms. Shirley K Byrd
Grants Management Officer



Recipient Information

Recipient Name

New Mexico Department of Health
1190 S St Francis Dr Flr 4 Ste N 4100
New Mexico Department of Health
Santa Fe, NM 87505-4173
[NO DATA]

Congressional District of Recipient

03

Payment Account Number and Type

1856000565C9

Employer Identification Number (EIN) Data

856000565

Universal Numbering System (DUNS)

808389274

Recipient's Unique Entity Identifier

Not Available

31. Assistance Type

Project Grant

32. Type of Award

Other

33. Approved Budget

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only	
II. Total project costs including grant funds and all other financial participation	
a. Salaries and Wages	\$7,464,474.00
b. Fringe Benefits	\$2,139,221.00
c. Total Personnel Costs	\$9,603,695.00
d. Equipment	\$0.00
e. Supplies	\$463,999.00
f. Travel	\$227,776.00
g. Construction	\$0.00
h. Other	\$9,825,203.00
i. Contractual	\$15,321,530.00
j. TOTAL DIRECT COSTS	\$35,442,203.00
k. INDIRECT COSTS	\$3,080,999.00
l. TOTAL APPROVED BUDGET	\$38,523,202.00
m. Federal Share	\$38,523,202.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390H06	21NH75OT000094C5	OT	41.51	\$38,523,202.00	75-2122-0140



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 1 NH75OT000094-01-00

FAIN# NH75OT000094

Federal Award Date: 05/28/2021

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$ 0.00	\$ 0.00	\$ 0.00
Fringe Benefits	\$ 0.00	\$ 0.00	\$ 0.00
Travel	\$ 0.00	\$ 0.00	\$ 0.00
Equipment	\$ 0.00	\$ 0.00	\$ 0.00
Supplies	\$ 0.00	\$ 0.00	\$ 0.00
Contractual	\$ 0.00	\$ 0.00	\$ 0.00
Construction	\$ 0.00	\$ 0.00	\$ 0.00
Other	\$ 0.00	\$ 0.00	\$ 0.00
Total	\$ 0.00	\$ 0.00	\$ 0.00

AWARD ATTACHMENTS

New Mexico Department of Health

1 NH75OT000094-01-00

1. OT21-2103 Terms and Conditions

Recipient: New Mexico Department of Health

AWARD INFORMATION

Incorporation: In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at <https://www.cdc.gov/grants/federalregulationspolicies/index.html>, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number CDC-RFA-OT21-2103, entitled National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities, and application dated May 3, 2021, as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

Approved Funding: Funding in the amount of \$38,523,202 is approved for a two year performance and budget period, which is June 1, 2021 through May 31, 2023. All future funding will be based on satisfactory programmatic progress and the availability of funds.

The federal award amount is subject to adjustment based on total allowable costs incurred and/or the value of any third party in-kind contribution when applicable.

Note: Refer to the Payment Information section for Payment Management System (PMS) subaccount information.

Component/Project Funding: The NOFO provides for the funding of multiple components under this award. The approved component funding levels for this notice of award are:

NOFO Component	Amount
Base funding	\$27,413,092
State Rural Carveout	\$11,110,110

Coronavirus Disease 2019 (COVID-19) Funds: A recipient of a grant or cooperative agreement awarded by the Department of Health and Human Services (HHS) with funds made available under the Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020 (P.L. 116-123); the Coronavirus Aid, Relief, and Economic Security Act, 2020 (the "CARES Act") (P.L. 116-136); the Paycheck Protection Program and Health Care Enhancement Act (P.L. 116-139); the Consolidated Appropriations Act and the Coronavirus Response and Relief Supplement Appropriations Act, 2021 (P.L. 116-260) and/or the American Rescue Plan of 2021 [P.L. 117-2] agrees, as applicable to the award, to: 1) comply with existing and/or future directives and guidance from the Secretary regarding control of the spread of COVID-19; 2) in consultation and coordination with HHS, provide, commensurate with the condition of the individual, COVID-19 patient care regardless of the individual's home jurisdiction and/or appropriate public health measures (e.g., social distancing, home isolation); and 3) assist the United States Government in the implementation and enforcement of federal orders related to quarantine and isolation.

In addition, to the extent applicable, Recipient will comply with Section 18115 of the CARES Act, with respect to the reporting to the HHS Secretary of results of tests intended to detect SARS-CoV-2 or to diagnose a possible case of COVID-19. Such reporting shall be in accordance with guidance and direction from HHS and/or CDC. HHS laboratory reporting guidance is posted at: <https://www.hhs.gov/sites/default/files/covid-19-laboratory-data-reporting-guidance.pdf>.

Further, consistent with the full scope of applicable grant regulations (45 C.F.R. 75.322), the purpose of this award, and the underlying funding, the recipient is expected to provide to CDC copies of and/or access to COVID-19 data collected with these funds, including but not limited to data related to COVID-19 testing. CDC will specify in further guidance and directives what is encompassed by this requirement.

This award is contingent upon agreement by the recipient to comply with existing and future guidance from the HHS Secretary regarding control of the spread of COVID-19. In addition, recipient is expected to flow down these terms to any subaward, to the extent applicable to activities set out in such subaward.

Financial Assistance Mechanism: Grant

Budget Revision Requirement:

By June 30, 2021, the recipient must submit a revised budget with a narrative justification. Failure to submit the required information in a timely manner may adversely affect the future funding of this project. If the information cannot be provided by the due date, you are required to contact the GMS/GMO identified in the CDC Staff Contacts section of this notice before the due date.

Please include the following information:

- Itemize budget items in Supplies and include budget justification.
- Direct base for indirect cost must be in accordance to the indirect cost rate agreement.
Total direct costs exclude subawards in excess of \$25,000.
-

Pre-Award Costs: Pre-award costs dating back to March 15, 2021 – and directly related to the COVID-19 outbreak response are allowable.

FUNDING RESTRICTIONS AND LIMITATIONS

Indirect Costs:

Indirect costs are approved based on the negotiated indirect cost rate agreement dated August 31, 2020, which calculates indirect costs as follows, a Provisional is approved at a rate of 20.20% of the base, which includes, excluding capital expenditures (buildings, individual items of equipment; alterations and renovations), that portion of each subaward in excess of \$25,000 and flow-through funds. The effective dates of this indirect cost rate are from July 1, 2020 to June 30, 2023.

REPORTING REQUIREMENTS

Required Disclosures for Federal Awardee Performance and Integrity Information System (FAPIIS): Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services
Dedrick Muhammad, Grants Management Specialist
Centers for Disease Control and Prevention
Global Health Services Branch
2939 Flowers Road
Atlanta, GA 30341
Email: qtm2@cdc.gov (Include "Mandatory Grant Disclosures" in subject line)

AND

U.S. Department of Health and Human Services
Office of the Inspector General
ATTN: Mandatory Grant Disclosures, Intake Coordinator
330 Independence Avenue, SW
Cohen Building, Room 5527
Washington, DC 20201

Fax: (202)-205-0604 (Include "Mandatory Grant Disclosures" in subject line) or
Email: MandatoryGranteeDisclosures@oig.hhs.gov

Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS). (45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

PAYMENT INFORMATION

The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to hhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.

Payment Management System Subaccount: Funds awarded in support of approved activities have been obligated in a subaccount in the PMS, herein identified as the “P Account”. Funds must be used in support of approved activities in the NOFO and the approved application.

The grant document number identified on the bottom of Page 1 of the Notice of Award must be known in order to draw down funds.

PROGRAM OR FUNDING SPECIFIC CLOSEOUT REQUIREMENTS

The final programmatic report format required is the following.

Final Performance Progress and Evaluation Report: This report should include the information specified in the NOFO and is submitted 90 days following the end of the period of performance via www.grantsolutions.gov . At a minimum, the report will include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant.
- List of publications resulting from the project, with plans, if any, for further publication.

Additional guidance may be provided by the GMS and found at:
<https://www.cdc.gov/grants/alreadyhavegrant/Reporting.html>

CDC Staff Contacts

Grants Management Specialist: The GMS is the federal staff member responsible for the day-to-day management of grants and cooperative agreements. The GMS is the primary contact of recipients for business and administrative matters pertinent to grant awards.

Program/Project Officer: The PO is the federal official responsible for monitoring the programmatic, scientific, and/or technical aspects of grants and cooperative agreements, as well as contributing to the effort of the award under cooperative agreements.

Grants Management Officer: The GMO is the federal official responsible for the business and other non-programmatic aspects of grant awards. The GMO is the only official authorized to obligate federal funds and is responsible for signing the NoA, including revisions to the NoA that change the terms and conditions. The GMO serves as the counterpart to the business officer of the recipient organization.

**Recipient Information****1. Recipient Name**

State of New Mexico
Address Line 1 Not Available
Santa Fe, NM 87505-4173
505-476-8204

2. Congressional District of Recipient

03

3. Payment System Identifier (ID)

1856000565C9

4. Employer Identification Number (EIN)

856000565

5. Data Universal Numbering System (DUNS)

808389274

6. Recipient's Unique Entity Identifier (UEI)

E7TEBXBL17P5

7. Project Director or Principal Investigator

Ms. Susan Garcia
Special Projects Director
susan.garcia@doh.nm.gov
505-670-4139

8. Authorized Official

Mr. Charles Lacy-Martinez
Grants Program Manager
Charles.lacy-martinez@doh.nm.gov
5054128538

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Angel Winters
Grants Management Officer/Specialist
jvr1@cdc.gov
404-498-4056

10. Program Official Contact Information

Mr. Quinney Harris
Program Officer
tfe5@cdc.gov
404-498-0591

30. Remarks

Department Authority

Federal Award Information**11. Award Number**

6 NH75OT000094-01-09

12. Unique Federal Award Identification Number (FAIN)

NH75OT000094

13. Statutory Authority

317(K)(2) OF PHSA 42USC 247B(K)(2)

14. Federal Award Project Title

New Mexico Department of Health - COVID19 Health Equity Initiative

15. Assistance Listing Number

93.391

16. Assistance Listing Program Title

Activities to Support State, Tribal, Local and Territorial (STLT) Health Department Response to Public Health or Healthcare Crises

17. Award Action Type

Terminate

18. Is the Award R&D?

No

Summary Federal Award Financial Information**19. Budget Period Start Date** 06/01/2021 - **End Date** 03/24/2025**20. Total Amount of Federal Funds Obligated by this Action**

\$0.00

20a. Direct Cost Amount

\$0.00

20b. Indirect Cost Amount

\$0.00

21. Authorized Carryover

\$0.00

22. Offset

\$0.00

23. Total Amount of Federal Funds Obligated this budget period

\$38,523,202.00

24. Total Approved Cost Sharing or Matching, where applicable

\$0.00

25. Total Federal and Non-Federal Approved this Budget Period

\$38,523,202.00

26. Period of Performance Start Date 06/01/2021 - **End Date** 03/24/2025**27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance**

\$38,523,202.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Mrs. Erica Stewart

Team Lead, Grants Management Officer



Recipient Information

Recipient Name

State of New Mexico

Address Line 1 Not Available

Santa Fe, NM 87505-4173

505-476-8204

Congressional District of Recipient

03

Payment Account Number and Type

1856000565C9

Employer Identification Number (EIN) Data

856000565

Universal Numbering System (DUNS)

808389274

Recipient's Unique Entity Identifier (UEI)

E7TEBXBL17P5

31. Assistance Type

Project Grant

32. Type of Award

Other

33. Approved Budget

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only	
II. Total project costs including grant funds and all other financial participation	
a. Salaries and Wages	\$6,130,000.00
b. Fringe Benefits	\$1,839,000.00
c. Total Personnel Costs	\$7,969,000.00
d. Equipment	\$420,000.00
e. Supplies	\$243,999.00
f. Travel	\$227,776.00
g. Construction	\$0.00
h. Other	\$350,000.00
i. Contractual	\$26,231,428.00
j. TOTAL DIRECT COSTS	\$35,442,203.00
k. INDIRECT COSTS	\$3,080,999.00
l. TOTAL APPROVED BUDGET	\$38,523,202.00
m. Federal Share	\$38,523,202.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390H06	21NH75OT000094C5	OT	41.51	93.391	\$0.00	75-2122-0140



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NH75OT000094-01-09

FAIN# NH75OT000094

Federal Award Date: 03/24/2025

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

AWARD ATTACHMENTS

State of New Mexico

6 NH75OT000094-01-09

1. Termination Terms and Conditions

TERMS AND CONDITIONS OF AWARD

Termination: The purpose of this amendment is to terminate this award which is funded by COVID-19 supplemental appropriations. The termination of this award is for cause. HHS regulations permit termination if “the non-Federal entity fails to comply with the terms and conditions of the award”, or separately, “for cause.” The end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out. Termination of this award is effective as of the date set out in your Notice of Award.

No additional activities can be conducted, and no additional costs may be incurred. Unobligated award balances will be de-obligated by CDC.

Closeout: In order to facilitate an orderly closeout, we are requesting that you submit all closeout reports identified below within thirty (30) days of the date of this NoA. Submit the documentation as a “Grant Closeout” amendment in GrantSolutions. The reporting timeframe is the full period of performance. Please note, if you fail to submit timely and accurate reports, CDC may also pursue other enforcement actions per 45 CFR Part 75.371.

Final Performance/Progress Report: This report should include the information specified in the Notice of Funding Opportunity (NOFO). At a minimum, the report will include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant.
- List of publications resulting from the project, with plans, if any, for further publication.

Final Federal Financial Report (FFR, SF-425): The FFR should only include those funds authorized and expended during the timeframe covered by the report. The final report must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Should the amount not match with the final expenditures reported to the Payment Management System (PMS), you will be required to update your reports to PMS accordingly.

Equipment and Supplies - Tangible Personal Property Report (SF-428): A completed SF-428 detailing all major equipment acquired with a unit acquisition cost of \$10,000 or more. If no equipment was acquired under the award, a negative report is required